## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>4-14-2010</u>	Address:	SR 66 east fo Deer Creek
Case #:	<u>34-36247</u>		Cannelton, IN
County:	Perry		
Type of Laboratory Seizure (check one)  ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only)		Seizure Location ( Residence Outbuilding	check all that apply)  Hotel/Motel  Open – No Structure
	ite (only)	Vehicle	Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)  Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
☐ Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e <b>Information</b> e/Pseudoephedrine Tracking Log erchant Tip
This report	t is to be faxed to the following agen	cies that serve the lo	ocation:
Health Depa	ment: <u>Cannelton VFD</u> artment: <u>Perry Co</u> ction Service: <u>N/A</u>	Fax: <u>N/A</u> Fax: <u>547.0415</u> Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K. Smith Phone 800.742.7475			

\*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

<sup>\*\*</sup> This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.